

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
Official Use Only

A Public Document

Please type or print in ink

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
SAUER	Anthony	Paul	(916) 263-8987
MAILING ADDRESS (May use business address)	STREET	CITY	STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS
			tsauer@dor.ca.gov

1. Office, Agency, or Court

Name of Office, Agency, or Court
Department of Rehabilitation.

Division, Board, District, if applicable:
Director's Office.

Your Position:
Director

→ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

- State
- County of _____
- City of _____
- Multi-County _____
- Other _____

3. Type of Statement (Check at least one box)

- Assuming Office/Initial Date: 07 / 25 / 07
- Annual: The period covered is January 1, 2006, through December 31, 2006.
-OR-
- The period covered is ____/____/____, through December 31, 2006.
- Leaving Office Date Left: ____/____/____
(Check one)
- The period covered is January 1, 2006, through the date of leaving office.
-OR-
- The period covered is ____/____/____, through the date of leaving office.
- Candidate

4. Schedule Summary

- Total number of pages including this cover page: 3
- Check applicable schedules or "No reportable interests."
I have disclosed interests on one or more of the attached schedules:
- Schedule A-1 Yes - schedule attached
Investments (Less than 10% Ownership)
- Schedule A-2 Yes - schedule attached
Investments (10% or greater Ownership)
- Schedule B Yes - schedule attached
Real Property
- Schedule C Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)
- Schedule D Yes - schedule attached
Income - Gifts
- Schedule E Yes - schedule attached
Income - Travel Payments
- OR-
- No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 8/10/07
(month, day, year)

Signature _____
(File the originally signed statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Anthony P. Sauer

> NAME OF BUSINESS ENTITY
IBM

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Office Equipment & Service

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock
 Other _____
(Describe)

IF APPLICABLE, LIST DATE:
_____/_____/06 ____/____/06
ACQUIRED DISPOSED

> NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock
 Other _____
(Describe)

IF APPLICABLE, LIST DATE:
_____/_____/06 ____/____/06
ACQUIRED DISPOSED

> NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
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 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock
 Other _____
(Describe)

IF APPLICABLE, LIST DATE:
_____/_____/06 ____/____/06
ACQUIRED DISPOSED

> NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock
 Other _____
(Describe)

IF APPLICABLE, LIST DATE:
_____/_____/06 ____/____/06
ACQUIRED DISPOSED

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GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock
 Other _____
(Describe)

IF APPLICABLE, LIST DATE:
_____/_____/06 ____/____/06
ACQUIRED DISPOSED

> NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
 \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT
 Stock
 Other _____
(Describe)

IF APPLICABLE, LIST DATE:
_____/_____/06 ____/____/06
ACQUIRED DISPOSED

Comments: _____

SCHEDULE C
Income, Loans & Business
Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name <u>Anthony P. Sauer</u>
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1. INCOME RECEIVED	1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>Sonoma State University</u>	NAME OF SOURCE OF INCOME <u>Nevada-Sierra Regional IHSS Public Authority</u>
ADDRESS _____ _____	ADDRESS <u>350 Crown Point Circle, Suite 115, Grass Valley, CA</u>
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Consultant on Grant Activity</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Special District</u>
YOUR BUSINESS POSITION <u>Special Consultant</u>	YOUR BUSINESS POSITION <u>Executive Director</u>
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Sale of _____ <i>(Property, car, boat, etc.)</i> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental income, <i>list each source of \$10,000 or more</i>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Sale of _____ <i>(Property, car, boat, etc.)</i> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental income, <i>list each source of \$10,000 or more</i>
<input checked="" type="checkbox"/> Other <u>Consultation ended June 30, 2007</u> <i>(Describe)</i>	<input checked="" type="checkbox"/> Other <u>Ended July 23, 2007</u> <i>(Describe)</i>

2. LOAN RECEIVED

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____ ADDRESS _____ BUSINESS ACTIVITY, IF ANY, OF LENDER _____	INTEREST RATE _____% <input type="checkbox"/> None	TERM (Months/Years) _____
HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence <input type="checkbox"/> Real Property _____ <i>Street address</i> _____ <i>City</i> <input type="checkbox"/> Guarantor _____ <input type="checkbox"/> Other _____ <i>(Describe)</i>	

Comments: _____